| | Declaratio | n for U.S. Pate | ent Application | | |
|--|--|---|---|---|--|
| As a below nam | ned inventor, I hereby declare th | at: | | | |
| My residence, p | oost office address and citizensh | ip are as stated below next | to my name. | | |
| I believe I am the names are listed DISPOSABLE IATROGENIC | ne original, first and sole inventon I below) of the subject matter when E SYRINGE DEVICE AUX INFECTION THROUGH N | or (if only one name is listed hich is claimed and for which KILIARY UNIT FOR REEDLE | d below) or an original, first and joch a patent is sought on the invent PREVENTING | oint inventor (if plural ion entitled | |
| | n of which is attached hereto unl | | | | |
| | ed on | | | | |
| | | | | | |
| I hereby state th amended by any | at I have reviewed and understa amendment referred to above. | nd the contents of the above | e-identified specification, including | g the claim(s), as | |
| | he duty to disclose information | which is material to patenta | bility as defined in Title 37, Code | of Federal | |
| inventor's certifi | oreign priority benefits under Ti icate listed below and have also ore that of the application for wh | identified below any foreig | § 119 (a) - (d) of any foreign appl n application for patent or invento | lication(s) for patent or r's certificate having | |
| | 2001–189973 | JAPAN | 22/6/2001 | Priority Claimed | |
| (List prior foreign applications. See note A) | (Number) | (Country) | (Day/Month/Year Filed) | X Yes No | |
| | (Number) | (Country) | (Day/Month/Year Filed) | Yes No | |
| | (Number) | (Country) | (Day/Month/Year Filed) | Yes No | |
| | (Number) | (Country) | (Day/Month/Year Filed) | Yes No | |
| (See note B) | See attached list for addition | nal prior foreign application | ns | | |
| provided by the i | er of each of the claims of this applications of this applications of the same | oplication is not disclosed in ed States Code, § 112, I ack ode of Federal Regulations | Sta | on in the manner ormation which is etween the filing date | |
| (List prior U.S. Applications) | (Application Serial No.) | (Filing Date) | | ding Abandoned | |
| | (Application Serial No.) | (Filing Date) | Patented Pend | ling Abandoned | |
| | (Application Serial No.) | (Filing Date) | Patented Pend | ling Abandoned | |
| | (Application Serial No.) | (Filing Date) | Patented Pend | ling Abandoned | |

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

23850
PATENT TRADEMARK OFFICE

Please direct all communications to the following address:



DATENT TO A DEMAND OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18 of the United States Code, § 1001 and that such willful false statements my jeopardize the validity of the application or any patent issued thereon.

| (See note C) | Full name of sole or first inventor (given name, family name) Koichiro ABE | | | | | | | | | | | | | |
|--------------|--|------------|----------|-----------|---------|-----------|-------------|----------|--------|-------------|----|-----|--------------|----|
| | Inventor's Sig | mature | Hn | chur | a. | gw | 7 | | Date | S | th | Oct | 7001 | |
| | Residence _ | | | | | | | | | | | | / | —, |
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| | Full name of second inventor (given name, family name) | | | | | | | | | | | | | |
| | Inventor's Sig | nature – | | | | | | | Date . | | | | | |
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| | Full name of | third inv | entor (g | iven name | e, fam | ily name) | | | | | | | | |
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| | Full name of | fifth inve | ntor (gi | ven name | e, fami | ly name) | <u> </u> | | | | | | | _ |
| | Inventor's Sig | nature – | | | | | | | Date . | | | | | |
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| | Full name of | sixth inv | entor (g | iven nam | e, fam | ily name) | | | | | | | | _ |
| | Inventor's Sig | nature - | | | | | | | Date . | | | | | _ |
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